



**Department of Justice
U.S. Attorney's Office
Southern District of Texas**

Donald J. DeGabrielle, Jr. • United States Attorney

FOR IMMEDIATE RELEASE
FRIDAY, JUNE 16, 2006
WWW.USDOJ.GOV/USAO/TXS

JOHN YEMBRICK
PUBLIC INFORMATION OFFICE
(713) 567-9388

**PHYSICIAN SENTENCED FOR DEFRAUDING
HEALTH CARE BENEFIT PROGRAMS**

HOUSTON, TX – Dr. Anant Mauskar was sentenced to 11 years and three months in prison for his participation in a scheme to defraud Medicare and Medicaid health care benefit programs. Mauskar was ordered to pay restitution of over \$14 million and he agreed to the forfeiture to the United States of \$644,449. United States Attorney Don DeGabrielle noted that Mauskar was immediately taken into custody.

The prison sentence was the result of his conviction by a jury on November 17, 2005, for conspiracy to commit health care fraud and receiving kickbacks as a result of a scheme that cost Medicare and Medicaid health care benefit programs more than \$15 million. In addition to the conspiracy, Mauskar was convicted of substantive counts of health care fraud in connection with Medicare and Medicaid claims for physical therapy services and durable medical equipment.

During trial, the United States proved that beginning in August 1999 and continuing through January 2000, Mauskar caused false and fraudulent claims to be submitted to Medicare for physical therapy evaluations and services in that (1) claimed evaluations were not performed by a physician; (2) claimed services were not performed; and (3) claimed services that were performed were done so by unqualified persons without the supervision of a physician. Although Mauskar signed forms representing that he personally evaluated and supervised services, he never examined any patients nor supervised any services. As a result more than \$1 million was paid to owners of physical therapy clinics. Dr. Mauskar received payments of \$500 a month from these owners for signing patient charts so they could bill Medicare and Medicaid.

Beginning in 2001 through December 2003, Dr. Mauskar engaged in another scheme to defraud Medicare by submitting false and fraudulent claims for services provided to Medicare beneficiaries who were unlawfully referred to him for the purpose of authorizing motorized wheelchairs knowing the beneficiary did not qualify under Medicare guidelines. Several beneficiaries who were transported to Mauskar's clinic testified that he did not examine them and several tests were performed prior to even seeing Mauskar. As a result of this scheme, Dr. Mauskar billed Medicare in excess of \$13 million and was paid \$1.6 million.

This case was investigated by the Federal Bureau of Investigation and the Department of Health and Human Services - Office of Inspector General. During trial, assistance was provided to the prosecution team by the Medicaid Fraud Control Unit of the Texas Attorney General's

Office. Assistant United States Attorney Samuel Louis and Cedric Joubert are prosecuting this case.

###